

Work Order ID 88877

August-08-12 4:12:41 PM

88877

~~PRELIMINARY ISSUE~~

Page 1

to Rev A Day 8/13/03/15

Item ID: D4648-1

Accept

N9000040100

Setup Start *NS1*

Revision ID: PRELIM

Item Name: Template

Stop *NS2*

Start Date: 08/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 22/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

MC

Date: 12/08/08

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4648	PA2								
100	FLOW WATER JET	0.00							
100									
Waterjet	Memo	0.00							Jm 12-8-9
FLOW CNC Waterjet	1-Cut as per Dwg Dwg Rev: PA2 Prog Rev: PA2 2-Deburr if necessary								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110									
QC	Memo	0.00							Jm 12-8-9
Quality Control									
120	QC8- Inspect parts - second check	0.00							
120									
QC	Memo	0.00							
Quality Control									



to Hars changed Day

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 88877

August-08-12 4:12:41 PM

88877

Page 2

Item ID: D4648-1

Accept

N900040100

Setup Start

NS1

Revision ID: PRELIM

Item Name: Template

Stop

NS2

Start Date: 08/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 22/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

Identify as per dwg & Stock Location: _____

0.00

130

Packaging

Memo

DARYL

0.00

Packaging

4/3/21 (1)

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

MLJ 13-03-21
ME 12-10-19 RD 3397

POSITIVE RECALL

EFFECTIVE *13-03-21* AUTH *[Signature]*

RELEASED *OAS* DATE *13/03/11*

16
9-00 to Rev A

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

August-08-12 4:12:45 PM

Page 1

Work Order ID: 88877

Parent Item: D4648-1

Parent Item Name: Template

88877

D4648-1

Start Date: 08/08/2012

Required Date: 22/08/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: Ipp RevA 12.08.08 New Issue DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

MLEXS.060-9034-08

Purchased

No

100

sf

25.6874

0.475

0.5

MI FXS 060-9034-08

.060" 9034 Lexan Sheet

**

Jm 12-8-9

Location

Loc Qty

Loc Code

MAT020

7.54

115569

7.54

therm

18.14736

117339

18.14736

117339

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge						
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

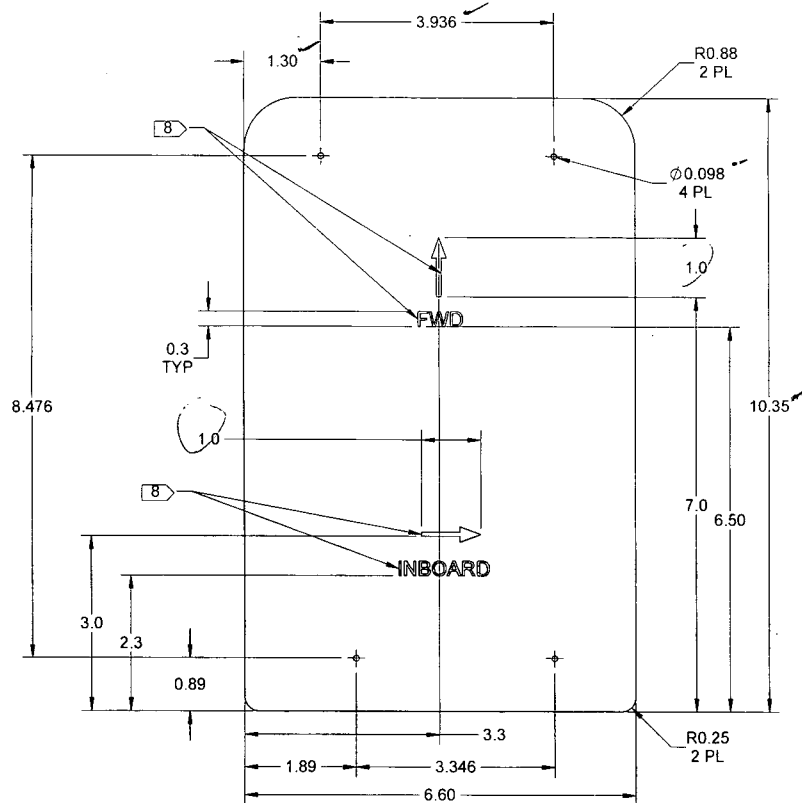
DART AEROSPACE LTD		Work Order: 88877
Description: D7648 Template		Part Number: D4648-1
Inspection Dwg: D4648 Rev: PA2		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø 0.098"	+0.004" -0.001"	0.099"	✓		✓	mm01
0.060"	±0.010"	0.060"	✓		✓	"
1.30"	±0.030"	1.312"	✓		✓	"
3.936"	±0.010"	3.949" 3.943"	✓		✓	"
8.476"	±0.010"	8.472"	✓		✓	Prodws02
1.89"	±0.030"	1.912"	✓		✓	mm01
3.346"	±0.010"	3.351"	✓		✓	"
6.60"	±0.030"	6.616"	✓		✓	"
10.35"	±0.030"	10.359"	✓		✓	Prodws02
3.6"	±0.100"	3.670"	✓		✓	mm01
2.4"	±0.100"	2.460"	✓		✓	"
1.8"	±0.100"	1.752"	✓		✓	"
0.4"	±0.100"	0.445"	✓		✓	"
6.70"	±0.030"	6.713"	✓			"
5.80"	±0.030"	5.809"	✓		✓	mm01

Measured by: Jm	Audited by: DAS	Preliminary Approval:
Date: 12-8-9	Date: 16 12/08/12	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	



D4648-1 TEMPLATE

SHOW TO
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 88877 MLJ
12/08/08

PRELIMINARY ISSUE

12.04.04

NOTES:

- 1) MATERIAL: 9034-08 OR 9034-01 CLEAR LEXAN SHEET (SMOOTH) 0.060 THICK
REF DART SPEC. MLEXS.060-9034-08 OR MLEXS.060-9034-01
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.18 lbs
- 8) ENGRAVE NOTES PER QSI 044 6.4

PA2	REVERSE FWD ARROW	RF	12.04.04
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>RF</i>	DRAWING NO. D4648	REV. PA2
MFG. APPR.			SHEET 1 OF 1
APPROVED		TITLE	SCALE
DE APPR.		TEMPLATE	NTS
DATE	12.04.04	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIES OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Receiving Report

Date: 11/4/17

Batch No: M17239

Supplier: SABR

Dart P/O: 13794

Packing Slip: Yes ☒ No ☐
 Invoice: Yes ☐ No ☒
 Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐
 Waybill Attached: Yes ☒ No ☐ N/A ☐
 Shipment Complete: Yes ☒ No ☐ N/A ☐
 QC6 Inspection ☒ N/A ☐
 Work Order 11/4/17 N/A ☒

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments
AA0110115		937.5			937.5	

Initials of receiver (if shipment OK) Level 12 [Signature]

Production/Admin: 11/4/17
 Date [Signature]
 Received/Costing [Signature]
 Initial [Signature]

Location _____

Friday, April 08, 2011 10:22:58 AM

Page 1 of 1

All amounts are calculated in domestic currency.

All Item ID/GL/WOs All Rec. Employees All Currencies

Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M / Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID\Vendor Name		VC-GE001	SABIC Polymershapes								
PO13794	2		MLEXS.060-9034-08 sf		4/7/2011	4/7/2011	32.0000	\$1.83	0.0000	0	\$58.56
CAD	No		.060" 9034 Lexan sf		32.0000	DESJ02		\$58.56	0.0000	0	
			Sheet								
			117339								
									Total Received Quantity:		32.0000
									Total Qty to Inspect (PO U/M):		0.0000
									Total Reject Quantity:		0.0000
									Total Receipt Value:		\$58.56
									Total Balance Due Quantity:		0.0000



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PO REPRINT

Purchase Order ID PO13794

Purchase Order Date 4/5/2011

PO Print Date 4/5/2011

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES
9150 AIRPORT ROAD
BRAMPTON, ON L6S 6G1
CA

Contact Name

Vendor Phone

800 267 1575

Vendor Fax

613 745 4291

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
CL 11/04/05

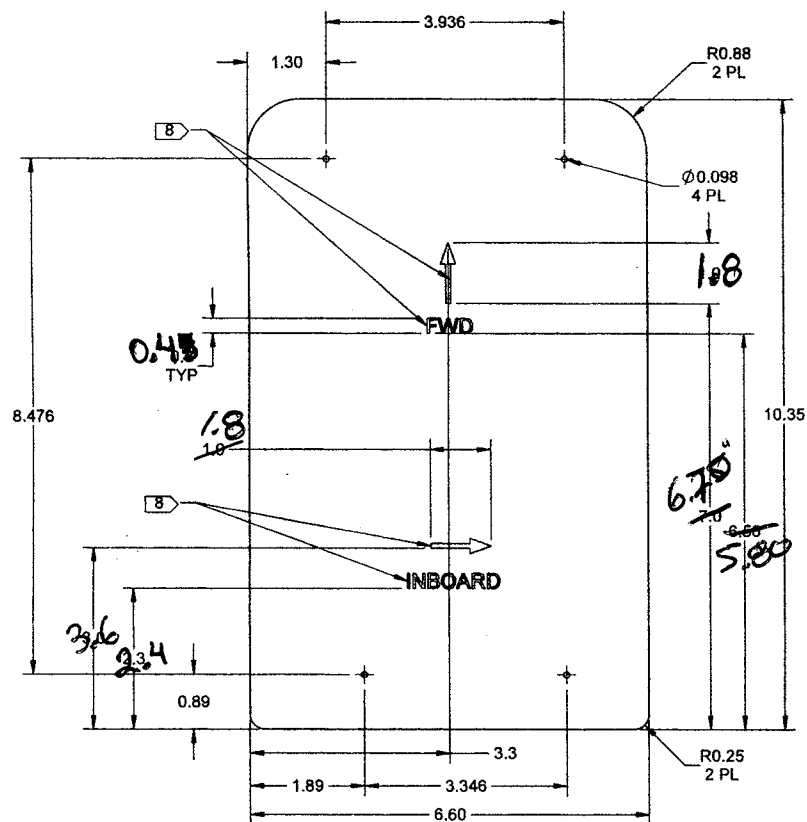
Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req. Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MACRLICS.125	1/8" Polycast II Sheet	4/15/2011 Yes	206.25 sf	TST ground	\$3.4444	\$710.40
		Special Inst:	MATERIAL: POLYCAST II CLEAR ACRYLIC PER MIL-P-5425 OR PLEXIGLASS "G" CAST ACRYLIC				
2	MLEXS.060-9034-08	.060" 9034 Lexan Sheet	4/7/2011 Yes	32.00 sf	TST ground	\$1.8300	\$58.56
		Special Inst:	MATERIAL: GE PLASTIC LEXAN LEXAN 9034 COLOR: 08 CLEAR				
PO Total:							\$768.96

MATERIAL CERTIFICATION
REQ'D UPON DELIVERY

Change Nbr: 2

Change Date: 4/5/2011

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required when applicable



D4648-1 TEMPLATE

PRELIMINARY ISSUE

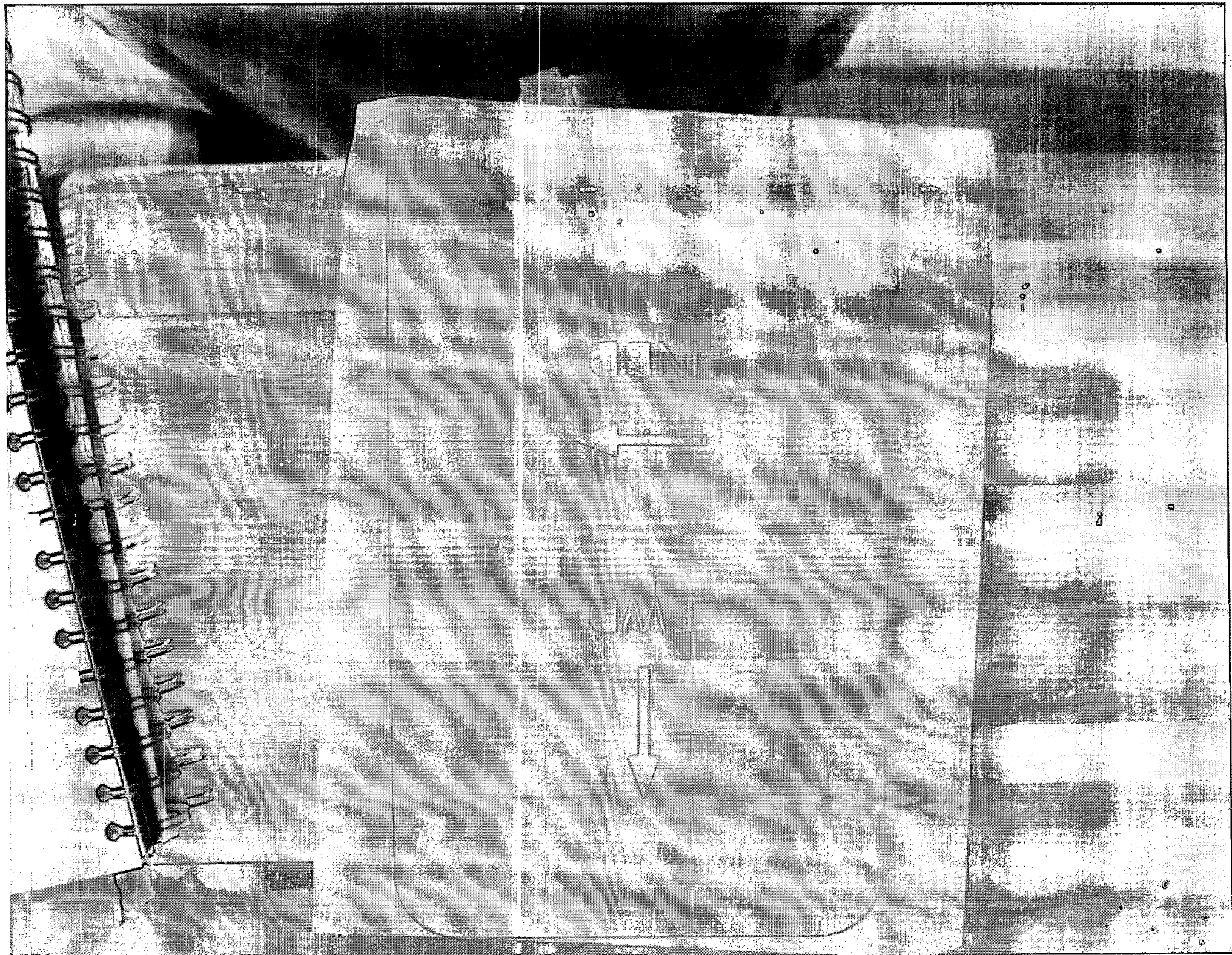
12.04.04

NOTES:

- 1) MATERIAL: 9034-08 OR 9034-01 CLEAR LEXAN SHEET (SMOOTH) 0.060 THICK
REF DART SPEC. MLEXS.060-9034-08 OR MLEXS.060-9034-01
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.18 lbs
- 8) ENGRAVE NOTES PER QSI 044 6.4

PA2	REVERSE FWD ARROW	RF	12.04.04
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>DC</i>	DRAWING NO.	REV. PA2
MFG. APPR.		D4648	SHEET 1 OF 1
APPROVED		TITLE	SCALE
DE APPR.		TEMPLATE	NTS
DATE	12.04.04	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OF COMING OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

[1:37:40 PM] Roberto Fuentes: It is ok to me, this change doesn't affect function. Right now I don't have time to update the drawing, if you like copy this note and attach to WO if that required to pass QC.



Receiving Report

Date: 11/4/7
 Supplier: SABR

Batch No: 0117239
 Dart P/O: 13794

Packing Slip: Yes ☒ No ☐
 Invoice: Yes ☐ No ☒
 Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐
 Waybill Attached: Yes ☒ No ☐ N/A ☐
 Shipment Complete: Yes ☒ No ☐ N/A ☐
 QC6 Inspection ☒ N/A ☐
 Work Order 11/4/7 N/A ☒

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments
AA00000000		937.5			937.5	

Initials of receiver (if shipment OK) Level 12

Production/Admin: 11/4/7
 Date
 Received/Costing
 Initial

Location

*** SHIPPER ***
 *** Conversion/Fabrication ***

A/C 14.33

SABIC Polymershapes
 250 Old Innes Rd., Unit 519

Page: 1

Ottawa, Ontario K1B 5L3
 PST 85637 2750 TR0001
 PHONE: (613)745-7043 FAX: (613)745-4291

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 Canada

1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 Canada
 1-613-632-5200

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDD
095760	DARAR	CHARGE GST	6112-5207	NET 30 DAYS	05.04.11		POAPSE	20.04.11
Ship.Doc.No	Salesrep	Customer P.O.#	Shipped Via	P.O.B.	Freight Terms		Inv. No.	Ship Date
01	93	13794	T S T		COLLECT			20.04.11
Ln#	Location	Ord	B/O	Ship	sku	Product Code	Description	U/Price

 DELIVERIES TO BE DONE BEFORE
 4:00 PM, ADVISE SHIPPING CO.

001 6 6 0 SHT 10100555 GM - CLEAR
 .118 X 50 X 99

002 1 0 1 SHT 11203205 9034-112 LEXAN
 .060 X 48 X 96

003 1 0 1 BA 0000005 THANK YOU FOR SELECTING
 SABIC POLYMERSHAPES

PLS SHIP AND B/O

Shippable Weight: 11.96 Lb

Cont/17

LINE No.	RECEIVING No.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE
					6/4/11		

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS.
 ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

SABIC
Innovative
Plastics

سابك
sabic

SABIC Polymershapes

1250 OLD INNES RD. 519 OTTAWA, ONT. K1B 5L3
TEL: 613 745 7043 FAX: 613 745 4291

CERTIFICATE OF COMPLIANCE

SOLD TO: DART AEROSPACE LTD.

DATE: 4/5/2011

YOUR PURCHASE ORDER: 13794

OUR SHIPPER NO: 095760

LINE ITEM #: 2

QUANTITY: 1

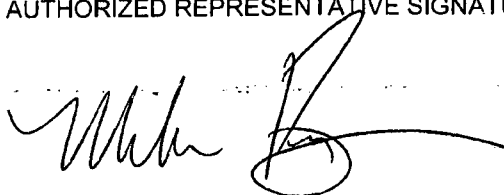
Sulw/n

DESCRIPTION: 9034-112 LEXAN
.060 X 48 X 96

THESE PARTS WERE MANUFACTURED IN ACCORDANCE WITH: UL 94 HB

THIS IS TO CERTIFY THAT THE MATERIAL FINISHES AND FUNCTIONAL REQUIREMENTS OF THE ABOVE LISTED PARTS ARE IN ACCORDANCE WITH THE REFERENCE PROCUREMENT SPECIFICATIONS, CONTROL DRAWINGS OR PARTS DESIGNATION AND LATEST REVISIONS AS REFERENCED ON THE SUBJECT PURCHASE ORDER.

AUTHORIZED REPRESENTATIVE SIGNATURE



MICHAEL POAPS
INSIDE SALES REPRESENTATIVE



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PO REPRINT

Purchase Order ID PO13794

Purchase Order Date 4/5/2011

PO Print Date 4/5/2011

Page Number 1 of 1

Order From : VC-GEP001

SABIC POLYMERSHAPES
9150 AIRPORT ROAD
BRAMPTON, ON L6S 6G1
CA

Contact Name
Vendor Phone 800 267 1575
Vendor Fax 613 745 4291
Vendor Account Nbr

Buyer Chantal Lavoie
Requisition Nbr
Tax Resale Nbr 10127-2607
Terms Net 30
Currency CAD
FOB Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
4/11/10

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req. Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MACRLICS.125	1/8" Polycast II Sheet	4/15/2011 Yes	206.25 sf	TST ground 68-70	\$3.4444	\$710.40
		Special Inst:	MATERIAL: POLYCAST II CLEAR ACRYLIC PER MIL-P-5425 OR PLEXIGLASS "G" CAST ACRYLIC				
2	MLEXS.060-9034-08	.060" 9034 Lexan Sheet	4/7/2011 Yes	32.00 sf	TST ground 4/4/11	\$1.8300	\$58.56
		Special Inst:	MATERIAL: GE PLASTIC LEXANT LEXAN 9034 COLOR: 08 CLEAR				
PO Total:							\$768.96

MATERIAL CERTIFICATION
REQ'D UPON DELIVERY

Change Nbr: 2

Change Date: 4/5/2011

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required when applicable

Purchase Order Receipt Listing

Page 1 of 1

Friday, April 08, 2011 10:22:58 AM

All amounts are calculated in domestic currency.

All Vendors PO ID po13794 All Receipt Dates All Line Item Types

All Item ID/GL/WOs All Rec. Employees All Currencies

Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M/ Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID/Vendor Name		VC-GE001	SABIC Polymershapes								
PO13794	2		MLEXS.060-9034-08 sf		4/7/2011	4/7/2011	32.0000	\$1.83	0.0000	0	\$58.56
CAD	No		.060" 9034 Lexan Sheet 117339	sf	32.0000	DESJ02		\$58.56	0.0000	0	
									Total Received Quantity:	32.0000	
									Total Qty to Inspect (PO U/M):	0.0000	
									Total Reject Quantity:	0.0000	
									Total Receipt Value:	\$58.56	
									Total Balance Due Quantity:	0.0000	

TST Overland ExpressDivision of TST Solutions L.P.
Une division de TST Solutions L.P.
DUNS No. 242148401 (OVLD)P.O. Box 3030, Station A, Mississauga, Ontario L5A 3S3
C.S.T.P. 144612488
Overland Western International Inc.(OVEA)
3091 Rockefeller Avenue, Cleveland, Ohio 44115-3611Carrier Code
Code du Transp.
2153

736-3864189 9

Manifest From - Manifest de Consignee - Consignataire DART AEROSPACE LTD 1270 ABERDEEN STREET HAWKESBURY, ON K6A 1K7		To - A 0007765 Bill of Lading No. - N° Connaissance		L/H Trailer - Unité Route 869274		Carrier Code 2153		Purchase Order No. - N° de Commande NS		M D J Y A 4 6 11	
Shipper - Expéditeur SABIC POLYMERSHAPES 1250 OLD INNES RD UNIT 519 OTTAWA, ON K1B 5L3		Origin OTT		Dest. MTL		C.D. 9		Declared Value - Valeur déclarée Type - Genre STD		Page 0 02	
Bill To - Facturer à Origin Carrier - Premier Transporteur		O/C Pro No. - N° Facture P/T		M D J		Beyond Carrier - Transporteur subs.		S.R.		Amount - Montant	
Pieces - Colis 1	H.M.	Description ** COLLECT **				Weight - Poids 255	Rate - Taux	Charges - Frais COLLECT			
Total Pieces Coils total 1		GST# 144612488		Total Weight Poids total 255		Total Charges Frais totaux COLLECT					
E & OE Print Last Name A TransForce Company		SW INTACT <input type="checkbox"/> YES <input type="checkbox"/> NO		Connecting Carrier Please - Protect this Amount Au transporteur suivant - Frais à protéger		Any loss or damage must be noted on pro bill at time of delivery, otherwise consignee's signature will constitute clear receipt. Toutes pertes ou dommages doivent être notés sur le connaissement au moment de la livraison, autrement la signature du consignataire constituera un reçu final.		C.O.D. Total P.S.L.		Cash or Certified Cheque Only - Driver Collect This Amount Chèque visé ou argent comptant seulement - à percevoir par le chauffeur	
X Received in Apparent Good Order - Reçu sans Avoir Apparente		Date		Time In Time Out		Unit - Unité		Driver - Chauffeur		Signature Copy - Copie de Signature	

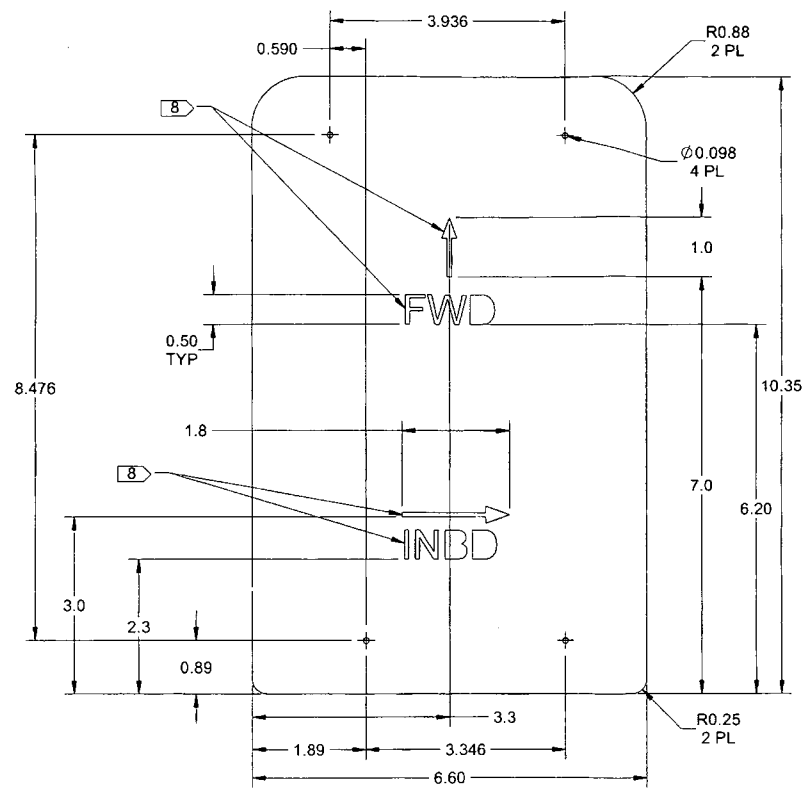
OEO-0981 04/06

TST Overland ExpressDivision of TST Solutions L.P.
Une division de TST Solutions L.P.
DUNS No. 242148401 (OVLD)P.O. Box 3030, Station A, Mississauga, Ontario L5A 3S3
C.S.T.P. 144612488
Overland Western International Inc.(OVEA)
3091 Rockefeller Avenue, Cleveland, Ohio 44115-3611Carrier Code
Code du Transp.
2153

736-3864189 9

Manifest From - Manifest de Consignee - Consignataire DART AEROSPACE LTD 1270 ABERDEEN STREET HAWKESBURY, ON K6A 1K7		To - A 0007765 Bill of Lading No. - N° Connaissance		L/H Trailer - Unité Route 869274		Carrier Code 2153		Purchase Order No. - N° de Commande NS		M D J Y A 4 6 11	
Shipper - Expéditeur SABIC POLYMERSHAPES 1250 OLD INNES RD UNIT 519 OTTAWA, ON K1B 5L3		Origin OTT		Dest. MTL		C.D. 9		Declared Value - Valeur déclarée Type - Genre STD		Page 0 01	
Bill To - Facturer à Origin Carrier - Premier Transporteur		O/C Pro No. - N° Facture P/T		M D J		Beyond Carrier - Transporteur subs.		S.R.		Amount - Montant	
Pieces - Colis 1	H.M.	Description SKD SHTS CLEAR GM LEXAN STC 1 BOX ASSOC ORD # 095760 SO# 095697 21.9 CFT 100X54X7 REWEIGH BY W & I ORIG STATED WT 200LBS SCALED TO 255LBS FUEL SURCHARGE				Weight - Poids 255	Rate - Taux	Charges - Frais COLLECT			
Total Pieces Coils total 1		GST# 144612488		Total Weight Poids total 255		Total Charges Frais totaux COLLECT					
E & OE Print Last Name A TransForce Company		SW INTACT <input type="checkbox"/> YES <input type="checkbox"/> NO		Connecting Carrier Please - Protect this Amount Au transporteur suivant - Frais à protéger		Any loss or damage must be noted on pro bill at time of delivery, otherwise consignee's signature will constitute clear receipt. Toutes pertes ou dommages doivent être notés sur le connaissement au moment de la livraison, autrement la signature du consignataire constituera un reçu final.		C.O.D. Total P.S.L.		Cash or Certified Cheque Only - Driver Collect This Amount Chèque visé ou argent comptant seulement - à percevoir par le chauffeur	
X Received in Apparent Good Order - Reçu sans Avoir Apparente		Date		Time In Time Out		Unit - Unité		Driver - Chauffeur		Signature Copy - Copie de Signature	

OEO-0981 04/06



D4648-1 TEMPLATE

NOTES:

- 1) MATERIAL: 9034-08 OR 9034-01 CLEAR LEXAN SHEET (SMOOTH) 0.060 THICK
REF DART SPEC. MLEXS.060-9034-08 OR MLEXS.060-9034-01
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.17 lbs
- 8) ENGRAVE NOTES USING 0.50 HIGH LETTERS

RELEASED
2012-11-05

A NEW ISSUE		RF	12.07.25
REV.	DESCRIPTION		BY DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	DC	DRAWING NO.	REV. A
MFG. APPR.	AK	D4648	SHEET 1 OF 1
APPROVED	AK	TITLE	SCALE
DE APPR.	AK	TEMPLATE	NTS
DATE	12.07.25	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	